## AMENDMENT TRANSMITTAL LETTER

Docket No. 2091-0232P

Application No. Filing Date Examiner Art Unit 09/773,619-Conf. #006945 February 2, 2001 S. K. Singh 2626

Applicant(s): Makoto HARA

Invention: SYSTEM, METHOD, AND APPARATUS FOR PRINTING, AND METHOD AND APPARATUS FOR ASSIGNING ORDERS

**MS Amendment Commissioner for Patents** P.O. Box 1450 Alexandria, VA 22313-1450

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

		CLAIM	S AS AMENI	DED	
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	,
Total Claims	31	- 31 =	0	х	
ndependent Claims	9	- 9 =	0	х	
Multiple Depen	dent Claims (ch	eck if applicable	e)	0.0000000000000000000000000000000000000	
Other fee (pleas	se specify): E	Extension for res	ponse within fi	st month	120.00
TOTAL ADDIT	IONAL FEE FO	OR THIS AME	NDMENT:		120.00
x Large Entity	/			Small Ent	ity
No addition	al fee is require	d for this amer	ndment		
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_	rge Deposit Acc			the amount of \$	
A duplicate	copy of this she	et is enclosed			
∐A check in t	he amount of \$	120.00	to cover	the filing fee is e	nclosed.
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PTO/SB/17 (12-04v2)
Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number. Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). **FEE TRANSMITTAL** Filing Date

Complete if Known 09/773,619-Conf. #006945 **Application Number** February 2, 2001 Makoto HARA First Named Inventor

For FY 2005				First Named Inventor		O K Citata			
	1 200			Examine	r Name	·	S. K. Singh		
Applicant claims small entity status. See 37 CFR 1.27			Art Unit 262		2626				
TOTAL AMOUNT OF PAYMENT (\$) 120.00		Attorney Docket No. 2091-0232P							
METHOD OF PAYMENT	(check all	that apply)					·····		
X Check Credit Car	d l	Money Order	Nor	ne	Other	(please ide	ntify):		
Deposit Account Deposit	Account Num	ber 02-2448 E	Deposit Acc	count Name:	J	Birch, S	tewart, Kolasch	& Birch, I	LLP
For the above-identific				_		•	·	•	
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FEE CALCULATION									
1. BASIC FILING, SEARCH,						EV444			
	FILIN	IG FEES Small Entity	SEA	ARCH FI Small	EES Entity	EXAM	INATION FEES Small Entity		
Application Type	Fee (\$)	Fee (\$)	Fee (\$	) Fe	e (\$)	Fee (\$	Fee (\$)	Fees I	Paid (\$)
Utility	300	150	500		50	200	100		
Design	200	100	100		50	130	65		
Plant	200	100	300	-	50	160	80		
Reissue	300	150	500	2	50	600	300		
Provisional	200	100	0		0	0	0		
2. EXCESS CLAIM FEES								Fee (\$)	Small Entity Fee (\$)
<u>Fee Description</u> Each claim over 20 (includin	a Deiceuec	1						50	25
Each independent claim over	-							200	100
Multiple dependent claims	5 (menuar	ing recissues,						360	180
Total Claims Extra Cl	aims !	Fee (\$)	Fee F	Paid (\$)		ı	Multiple Depende		
- 31 =		= _			_	_		Fee Paid (\$	-
Indep. Claims Extra Cl		Fee (\$)	Fee F	Paid (\$)	_				
9 = 3. APPLICATION SIZE FEE	× -								
If the specification and draw	vings exce	ed 100 sheets o	of paper	(excludin	g electr	ronically t	filed sequence or	computer	
listings under 37 CFR 1 sheets or fraction thereof						for small	entity) for each a	dditional 5	0
	a Sheets					ction there	eof Fee (\$)	Fee	Paid (\$)
100 =		/50		(round up	to a who	ole number	r) x	=	<u></u>
4. OTHER FEE(S)								<u>Fees</u>	Paid (\$)
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SUBMITTED BY	11				
Signature	minh	Registration No. (Attorney/Agent)	39,491	Telephone	(703) 205-8000
Name (Print/Type)	Michael R. Cammarata			Date	October 3, 2005

